SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

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British Medical Association.

CURRENT NOTES.

The Medical Secretary's Visit to South Africa.

Dr. Cox, in the course of a letter written from Bulawayo, says that he was handsomely entertained by the Matabeleland Division of the Association at a well attended dinner. The Matabeleland Division includes practitioners who are scattered over an enormous area, and this naturally militates against frequent trips to the centre at Bulawayo. The medical officer of health for Bulawayo, Captain A. W. Forrester, and Dr. and Mrs. Ellis looked after Dr. Cox during his stay in Bulawayo. On December 18th, 1925, a well attended and successful meeting of the local profession was held under the chairmanship of Dr. F. H. Ellis, *M.C.*, chairman of the Division, when there was a very useful discussion in connexion with the local organization of the profession. Captain Forrester, who has for so long acted as honorary secretary to the Division, relinquished the post at his own request, and Dr. H. J. Morris was elected in his stead. The meeting cordially thanked Captain Forrester for his past services. Judging by the enthusiasm shown at the meeting there would appear to be a bright outlook for the Division in the future. Combining pleasure with business, Dr. Cox was given an opportunity to visit the Victoria Falls, and whilst there he was asked by Dr. A. W. May, C.M.G., the senior medical officer of the Northern Rhodesian Government, to visit him at Livingstone, which is some ten miles north of the Falls. Dr. Cox was entertained at Livingstone by Dr. and Mrs. May, and was shown the European and native hospitals. He was also entertained to tea by the Governor, Sir H. J. Stanley, and by Mr. R. Goode, C.M.G., C.B.E., the chief secretary. The medical profession in Johannesburg has asked Dr. Cox to pay another visit to that city on his return journey, and this he hopes to do some time between February 16th and 19th.

Subscriptions for 1926.

Members of the British Medical Association are reminded that subscriptions for the year became due on January 1st. The work of the Head Office would be very considerably lightened if each member would send his or her subscription to the Financial Secretary as soon as possible after receiving the application for same. Members are also reminded of the claims of charity, to which reference was made in this column last week, and are asked to add to their next payment a sum for the credit of the B.M.A. Charities Fund.

The Half-yearly Indexes.

The usual half-yearly indexes to the Journal and to the Supplement and Epitome have been prepared and will be published shortly; they will, however, not be issued with all copies of the Journal, but only to those readers who ask for them. Any member or subscriber who desires to have one or all of the indexes can obtain what he wants, post free, by sending a post-card notifying his desire to the Financial Secretary and Business Manager, British Medical Association House, Tavistock Square, W.C.1. Those wishing to receive the indexes regularly as published should intimate this desire.

Association Notices.

BRANCH AND DIVISION MEETINGS TO BE HELD.

Birmingham Branch: Nuneaton and Tamworth Division.—An ordinary meeting of the Nuneaton and Tamworth Division will be held at the Nuneaton General Hospital on Wednesday, January 20th, at 3.15 p.m. Agenda: Receive and adopt the report of Executive Committee as to the scale of minimum commencing salaries for public health medical officers, and resolution in connexion therewith; paper by Mr. Bernard G. Goodwin, F.R.C.S.: Some modern methods in diagnosis and treatment of surgical diseases of the urinary system.

Essex Branch: South Essex Division.—A general meeting of the South Essex Division will be held at the Victoria Hospital, Southend-on-Sea, on Tuesday, January 19th, at 8.30 p.m. Agenda: Consider adoption of proposed salaries of medical officers of health; address by Dr. Floyd on forty years in general practice.

Kent Branch: Rochester, Chatham, and Gillingham Division.—A meeting and dinner of the Rochester, Chatham, and Gillingham Division will be held at the Bull Hotel, Rochester, on Wednesday, January 27th, at 7.15 p.m. Members of the R.M. Band will play during dinner. Agenda: Consider report of executive as to the scale of minimum commencing salaries for public health medical officers, and proposal that the Division adopt a resolution in connexion therewith; election of officers and Ethical Committee; Dr. James Neal, general secretary of the Medical Defence Union, will speak on the work and activities of the union.

Lancashire and Cheshire Branch: Mid-Cheshire Division.—The annual general meeting of the Mid-Cheshire Division will be held on Wednesday, January 27th, at 8.30 p.m., in the Board Room of the Altrincham General Hospital. Business: Report of Executive Committee for the past year; election of officers; presentation of chairman's badge by Dr. Garstang.

Metropolitan Counties Branch: Camberwell Division.—A meeting of the Camberwell Division will be held at St. Giles's Hospital, Camberwell, on Tuesday, January 19th, at 9 p.m. Agenda: Address by Dr. W. Langdon Brown, physician to St. Bartholomew's Hospital, on the future of endocrinology; report of Executive Committee as to the scale of minimum commencing salaries for public health medical officers; recommendation of Executive that the Division adopt a resolution under its Ethical Rules; proposed annual meeting at British Medical Association House.

Metropolitan Counties Branch: Lewisham Division.—A meeting of the Lewisham Division will be held on Tuesday, January 19th, at 8.45 p.m., at the Parish Room, St. Laurence Vicarage, Bromley Road, Catford, when Dr. R. Godwin Chase will occupy the chair. Agenda: Correspondence; receive report on the scale of minimum commencing salaries for public health medical officers and consider adoption of a resolution; consider child welfare centres and municipal lying-in homes; paper on chronic infective processes by Dr. Harold Pritchard.

Metropolitan Counties Branch: North Middlesex Division.—A general meeting of the North Middlesex Division will be held on Wednesday, January 27th, at 3.30 p.m., in the Southgate Council Offices, Palmers Green. Agenda: Receive and adopt report of Executive Committee as to the scale of minimum commencing salaries for public health medical officers, and consider recommendation of executive that the Division adopt a resolution with reference thereto under its Ethical Rules; consider interim report of Puerperal Morbidity Committee, and reply to questionary attached thereto.

METROPOLITAN COUNTIES BRANCH: WILLESDEN DIVISION.—A meeting of the Willesden Division will be held at the Willesden General Hospital, Harlesden Road, on Wednesday, January 20th, at 9 p.m. Agenda: Interim report on the causation of puerperal morbidity and mortality (see SUPPLEMENT, BRITISH MEDICAL JOURNAL, January 9th, pp. 13 to 16); Dr. Everard H. G. Williams, secretary of the committee, will speak. Members are requested to state their opinions and to send their answers in writing to the questions on page 16 to Dr. W. D. Champneys, assistant medical officer of health, Dyne Road, N.W.6.

MIDLAND BRANCH: NOTTINGHAM DIVISION.—A meeting of the Nottingham Division will be held on Tuesday, January 26th, at 4 p.m., at 64, St. James Street. Agenda: Consider recommendation from the executive to form a voluntary fund to pay out-of-pocket expenses of representatives to Annual Meetings; receive and adopt report of Executive Committee as to the scale of minimum commencing salaries for public health medical officers; and consider recommendation that the Division adopt a resolution under its Ethical Rules with reference thereto.

SOUTH WALES AND MONMOUTHSHIRE BRANCH: CARDIFF DIVISION.—A clinical meeting will be held by the Cardiff Division in the Medical Unit Lecture Room, Cardiff Royal Infirmary, on Wednesday, January 20th, for short papers and clinical cases.

SOUTH-WESTERN BRANCH: WEST CORNWALL DIVISION.—A meeting of the West Cornwall Division will be held in the Royal Cornwall Infirmary, Truro, on Tuesday, January 19th, at 3 p.m. Agenda: Paper on haematuria by Dr. R. S. Coldrey, to be followed by discussion. Tea will be served.

SUFFOLK BRANCH: SOUTH SUFFOLK DIVISION.—The annual meeting of the Division will be held at the Crown and Anchor Hotel, Ipswich, on Friday, January 22nd, at 3.30 p.m. The business includes presentation of annual report and balance sheet; election of officers for 1926; report of Executive Committee as to the scale of minimum salaries for public health medical officers, and proposed resolution under Ethical Rules arising therefrom; provision of flag for Great Hall of British Medical Association House.

SUFFOLK BRANCH: WEST SUFFOLK DIVISION.—A meeting of the West Suffolk Division will be held at the West Suffolk General Hospital, Bury St. Edmunds, on Tuesday, January 19th, at 3 p.m. Agenda: Correspondence; report of Executive Committee as to the scale of minimum commencing salaries for public health medical officers; recommendation of executive that the Division adopt a resolution under its Ethical Rules. Clinical: Consider interim report of the British Medical Association Puerperal Morbidity Committee (see SUPPLEMENT, January 9th). Dr. Canney (Cambridge) will introduce the report and open a discussion thereon. Tea will be provided.

SURREY BRANCH: CROYDON DIVISION.—A meeting of the Croydon Division will be held at the Croydon General Hospital on Tuesday, January 26th, at 8.30 p.m., when Mr. Norman Patterson, F.R.C.S., will read a paper on the more recent methods employed in the treatment of malignant disease of the upper air passages.

YORKSHIRE BRANCH: BRADFORD DIVISION.—A supper dance will be held by the Bradford Division at the Midland Hotel, Bradford, on Tuesday, January 26th.

YORKSHIRE BRANCH: LEEDS DIVISION.—A meeting of the Leeds Division will be held on Thursday, January 21st, at 8.30 p.m., in the Medical School, Leeds. Sir Berkeley Moynihan, Bt., will read a paper on gall stones, their method of formation and the symptoms they cause. All medical men resident in the area of the Leeds Division are invited to attend.

Meetings of Branches and Divisions.

JAMAICA BRANCH.

THE annual general meeting of the Jamaica Branch took place on December 17th, 1925, in the Institute of Jamaica.

The following officers were elected for 1926:

President, Dr. Gifford. *President-Elect*, Dr. Grabham. *Secretary and Treasurer*, Dr. Da Costa. *Assistant Secretary and Treasurer*, Dr. Strathairn.

Dr. WILLIAMS submitted an account of the proceedings of the Branch during the past few years. Dr. STRATHAIRN read two short papers on vaccination and high energy chemistry. The discussion that followed was mainly concerned with the question as to the nature of alastrim, and most of the members took part.

SOUTHERN BRANCH: PORTSMOUTH DIVISION.

A MEETING of the Portsmouth Division was held at the Queen's Hotel, Southsea, at 9.30 p.m. on January 7th, when Dr. A. MEARNS FRASER was in the chair. The meeting was one of the most successful which has been held, and was attended by nearly one hundred members, of whom seventy sat down to supper, which, as usual, was served at 9 o'clock.

By the invitation of the Division the speaker of the evening was Dr. MARIE STOPES, Ph.D., who gave an interesting address on contraception. The speaker dealt with the subject from its historical, religious, and social aspects, and gave a description and criticism of the various methods commonly in use. The address was followed by an animated discussion, in which a very large number of members took part. A very cordial vote of thanks, proposed by Mr. T. A. MUNRO FORDE, and seconded by Mr. A. BOSWORTH WRIGHT, was accorded by acclamation to Dr. Marie Stopes for her address.

During the evening the flag to be presented by the Portsmouth Division to the Association was on view. Also a resolution was passed conveying to Dr. H. H. Warren, the honorary secretary, the best wishes of the Division for a speedy return to good health.

National Insurance.

A PUBLIC MEDICAL SERVICE FOR LONDON.

GENERAL MEETING OF PRACTITIONERS.

A GENERAL meeting of London practitioners was held in the Great Hall of the British Medical Association's House on the afternoon of Sunday, January 10th, to discuss the scheme for a Public Medical Service for London which has been projected by the Local Medical Committee acting as a temporary committee of management. Those attending numbered 320, and the scheme appeared to receive general endorsement, although no resolutions were taken.

The scheme, which is to be administered by a central committee and by local committees, is one to organize the provision of medical attendance and medicine by a contributory arrangement for persons otherwise unable to pay the ordinary medical charges. A capitation fee of at least 3d. a week for professional services is to be charged for each subscriber, and the subscribers become eligible for treatment fourteen days after admission. To meet the administrative expenses it is proposed to require 1s. entrance fee for each subscriber and to charge a sum of 9d. a quarter. The income limit is the same as that provided under the National Health Insurance Act—namely, £250 a year. The services to be given include medical and surgical treatment, within the competence and skill of the general practitioner, at the surgery or, when the patient's condition requires it, ordinary medical and surgical treatment at his domicile, together with all needful medicines, except certain special preparations duly set out. Subscribers are not to be entitled, in consideration of their ordinary subscriptions, to medical service in respect of confinements and miscarriages, or illness resulting therefrom within ten days, operations requiring general anaesthetics or the administration of such anaesthetics, operative dentistry, vaccinations, night and special visits, certificates and reports, treatment of venereal disease, and catheterization. A scale of minimum fees for all these services may, however, be drawn up by the committee in any area for approval by the central committee. Appliances, such as trusses and splints, are not to be provided. Special examinations, such as *x*-ray, are not included, nor are examinations or court attendances under common law or under Workmen's Compensation or other statutes. Various other rules relate to the government of the members of the service—that is, the practitioners—one of them requiring that no member shall take any individual contributory contract patient at a lower rate or fee than prescribed in the rules or continue to treat any such patient except with the consent of the central committee.

Dr. H. J. CARDALE, chairman of the Local Medical Committee, presided, and in a brief opening statement said that the scheme was the result of a good deal of hard work by three co-operating bodies—namely, the Metropolitan Counties Branch of the British Medical Association, the Medical Practitioners' Union, and the Local Medical Committee. In drawing up the scheme advantage had been taken of information relating to other schemes which were already working in different parts of the country. He wished to draw attention to one of the chief principles underlying this arrangement. In cheap contract work in the past there had no doubt always been a semi-charitable element. It was thought desirable in this instance that the charitable side should be separated from what might be called the professional-fee side of the question, and that such fees should be devised as the profession thought itself properly entitled to, but that opportunity should be left in the scheme for the exercise of benevolence. If in certain localities it was found that some people could not afford the full figure it would be open to any benevolent committee under the scheme to say that such people might be treated on a lower basis; but the scheme itself must embody what, in the circumstances, might be called an adequate professional fee.

Dr. E. A. GREGG, in a lengthy exposition of the scheme, said that in its present shape it originated in the minds of the Local Medical Committee. One of the first things which that committee did was to go to the medical organizations and get their assistance, and that assistance had been given with the greatest courtesy and sympathy by the Council of the Metropolitan Counties Branch of the British Medical Association and by the Council of the Medical Practitioners' Union. In the proceedings of the Court of Inquiry on the insurance capitation fee two years ago, nothing had impressed him more than that some of the most damaging points against the profession arose out of the evidence as to certain forms of contract practice. It was felt by some who listened to that evidence that the time had come for the profession to set its house in order. Hence the proposal to set up a form of contract medical service which would not leave them shamefaced when they came to negotiate with large public bodies—such, for instance, as the London County Council. There was an unfortunate tendency for every

practice carried on in an industrial or semi-industrial area to have its scale of fees determined by the minimum fee—the fee that the poorest person attended in that practice was able to pay. If, therefore, it was possible by some scheme to provide for this lower-paid class—for those whose position in life prevented them from being able to pay a cash fee of a more or less adequate character—the result would be that other people, who could afford to pay an adequate fee, would no longer come in at the minimum charges. Therefore, it was proposed to set up a public medical service, which was a method of attending people on a contractual basis for a minimum fee, but not on philanthropic or benevolent lines. The method might be described as being in accordance with that which was widely recognized by the working classes when they had to provide for their more expensive commodities—namely, the instalment system. He also drew attention to the desirability of having an alternative scheme in readiness in the event of any breakdown in the scheme of medical service under the National Health Insurance Act. Some little time ago, when such a breakdown appeared imminent, it was said that the people concerned—that is, the present insured population—must be attended under the conditions of private practice. This, however, while availing as a temporary arrangement, could hardly be considered practicable for any length of time. Dr. Gregg added that the scheme now put forward was to be a doctors' scheme entirely; it would be administered by the profession through elected central and local bodies. There was nothing to prevent a higher scale of fees than the one submitted being set up in favoured areas—he instanced Hampstead—but the committee insisted that the scale must not be lowered. The scheme was definitely confined to the ordinary medical service, but, again, there was no reason why a scale should not be put forward for the excepted additional services. To meet the establishment expenses it was proposed that members—the participating practitioners being described as "members" in distinction from the "subscribers" or beneficiaries—joining the scheme during the first year should pay £5, which would be repayable at death or on withdrawal, and that those joining later should pay an entrance fee of £2 2s., which would not be returnable.

The memorandum setting out the details of the scheme was then taken paragraph by paragraph, and the remainder of the meeting was mostly occupied with questions addressed to the chair on various points.

The CHAIRMAN, in reply to a question as to whether amendments of the rules might not be accepted from the meeting, explained that at the end of the year the scheme would be placed entirely in the hands of the members, who would elect their own committee of management, and would be able to make what alterations in the rules they pleased. At present the committee of management was a temporary one, and although the committee would give due consideration to any views expressed in the meeting in adjusting finally the details of the scheme, he did not think it would serve any useful purpose to take motions to amend the rules set out. In reply to Dr. R. S. PEARSON, who asked whether no expression of opinion was to be called for as to whether a scheme was desired at all, the CHAIRMAN said that it was known that at any rate a minority of practitioners wanted a scheme of this kind, and in any case the scheme would go forward.

Dr. JOHN MCNAMARA criticized the scheme as likely to bring upon the profession all the "horrors of the old club system" in the way of dispensing. Dr. GREGG replied that the scheme had been carefully framed to avoid the evils attendant on the old practice.

With regard to a rule that no canvassing or advertising should be permitted by or on behalf of any member, the CHAIRMAN, replying to questions as to how the scheme could be made known, said that there was nothing to prevent a doctor from exhibiting notices in his surgery. In one way or another, without direct advertising, people would become acquainted with the scheme. There was a good deal of contract practice in London at the present time, and the bodies concerned could be notified that it was no longer possible to attend their members at the old rates, if these were lower than the rates proposed under the scheme, but that they might be attended under the conditions of this new arrangement.

Dr. BRACKENBURY remarked that it was all very well to say that a man could put up a notice in his surgery. But what was his position towards the family of an insured person on another doctor's list, which doctor did not come into this public service scheme? Was he at liberty to accept the family of that insured person? That might create a very difficult situation.

Dr. C. H. PANTING, from his two years' experience of the Essex Public Medical Service, said that in practice he did not think any difficulty would arise. In the Essex service there had been no trouble at all from canvassing by the collectors—of course, care had been taken to see that these were people of the right character to begin with, and also that they were independent persons, that is, were unconnected with approved societies and the like—and there had been only one case of canvassing by a doctor, which had been promptly dealt with by expulsion from the service. The service had been built up entirely by the interest of the doctors, and they could be trusted, with the rarest exceptions, to work in accordance with the professional code. A man did not become less honourable in all professional matters because he entered a public medical service.

Some criticism took place with regard to the contributions. Dr. SCHIFF pointed out that 3d. a week meant 13s. a year, and in his view it was not worth while to have patients at this sum, bearing in mind the fact that it included medicines, and that the patients included large numbers of women and children, attendances on whom would be more numerous than in the case of ordinary insurance patients.

The CHAIRMAN said, in reply to a question, that he thought the fees paid under this scheme were higher than under any other public medical service scheme up to the present.

Dr. PANTING pointed out that the scheme was intended only for those who could not afford medical attendance in any other way, and it was desired to keep it down to that class of person.

Dr. BRACKENBURY, speaking from considerable experience of capitation fees, considered 3d. a week exactly the right figure. The proper fee under the National Insurance Act, in his opinion, would be 10s. 6d., which, of course, was *minus* dispensing. Probably many insurance practitioners would prefer to have to undertake dispensing if they could be relieved of some of the requirements in their present terms of service which they disliked more. But if to a 10s. 6d. insurance fee were added 2s. 8d.—the latest figure—for drugs and dispensing, the total would be just over the 13s. a year, which was the sum set out in the present scheme. The question was, of course, bound up with the income limit, and he understood that the income limit in this scheme (£250) was to be applied to all sorts of workers, whether manual or non-manual.

Some criticism was directed against the income limit, which was regarded as excessive by one or two speakers. Another speaker complained of the large amount put down for administration, which brought up the amount to be paid yearly by the subscriber to 16s. The CHAIRMAN pointed out that the two funds, for professional services and for administration, were entirely separate.

In a brief discussion on the limitation of benefits, the CHAIRMAN said that the fact that special visits were not included in the service provided would not, of course, prevent a doctor responding to an urgent call; the provision was designed to safeguard the practitioner against that annoying class of case, not urgent, in which a request for a visit was received after he had left on his daily round. A question was asked as to whether the scheme was not likely to be wrecked by the fact that night visits were excluded from its provisions, but the Chairman said that that had not been the experience in other schemes of the kind.

A vote of thanks was carried with hearty acclamation to Dr. Cardale, Dr. Gregg, and the other gentlemen who had formulated the scheme, and forms of application for practitioners to become members of the service were signed at the close of the meeting.

VACANCIES.

BARNSLEY COUNTY BOROUGH.—Assistant Medical Officer of Health and Assistant School Medical Officer. Salary £500 per annum.

BIRMINGHAM: QUEEN'S HOSPITAL.—Honorary Physician.

BRADFORD CHILDREN'S HOSPITAL.—Male House-Surgeon. Salary £100 per annum.

BRADFORD ROYAL INFIRMARY.—Two House-Surgeons (male, unmarried). Salary £150 per annum.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE HEART AND LUNGS, Victoria Park, E.2.—House-Physician (male). Salary at the rate of £100 per annum.

COLOMBO MUNICIPALITY, Ceylon.—Ceylonese Junior Assistant Medical Officer of Health. Initial salary Rs.7,200 per annum, rising to Rs.12,000 per annum.

DERBY COUNTY BOROUGH.—Assistant Medical Officer (male). Salary £600 per annum.

DUNDEE ROYAL INFIRMARY.—Honorary Assistant Ophthalmic Surgeon.

EDINBURGH: ELSIE INGLIS MEMORIAL MATERNITY HOSPITAL.—Junior Honorary Obstetric Surgeon (female).

EDINBURGH ROYAL INFIRMARY: NEW RADIOLOGICAL DEPARTMENT.—(1) Two Assistant Medical Officers; salary £450 and £350 per annum respectively. (2) Head Masseuse; salary £350 per annum.

ELIZABETH GARRETT ANDERSON HOSPITAL, Euston Road, N.W.—Assistant Pathologist (medical woman), part time. Salary £150 per annum.

EVELINA HOSPITAL FOR CHILDREN, Southwark, S.E.1.—House-Physician (male). Salary £120 per annum.

GLASGOW: ANIMAL DISEASES RESEARCH ASSOCIATION.—Director of Research in Animal Diseases. Salary £800 per annum.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.1.—Resident Medical Superintendent. Salary £300 per annum.

ILFORD URBAN DISTRICT COUNCIL.—Chief Assistant Medical Officer of Health. Salary £700 per annum, rising to £800.

LAMBETH BOARD OF GUARDIANS.—Public Vaccinator in the Stockwell District.

LEEDS PUBLIC DISPENSARY.—Senior Resident Medical Officer (male). Salary £200 per annum.

LIVERPOOL CANCER AND SKIN HOSPITAL.—Honorary Radiologist.

LIVERPOOL: ROYAL SOUTHERN HOSPITAL.—Anaesthetist. Honorarium £50 per annum.

MANCHESTER: ANCOATS HOSPITAL.—House-Physician. Salary at the rate of £100 per annum.

MANCHESTER COMMITTEE ON CANCER.—Special Investigation Officer. Salary £600 per annum

METROPOLITAN HOSPITAL, Kingsland Road, E.8.—Assistant Physician.

MIDDLESEX COUNTY COUNCIL.—Third Assistant Resident Medical Officer at the County (Tuberculosis) Sanatorium, Harefield (unmarried). Salary £400 per annum.

PERTH: JAMES MURRAY'S ROYAL ASYLUM.—Assistant Physician (male, unmarried). Salary £300 per annum.

SHANGHAI MUNICIPAL COUNCIL.—Assistant Health Officer in the Public Health Department. Salary Taels 700 per mensem.

SHROPSHIRE ORTHOPAEDIC HOSPITAL, Oswestry.—House-Surgeon. Salary £200 per annum.

SOUTHPORT CONVALESCENT HOSPITAL AND SEA BATHING INFIRMARY.—Resident Medical Superintendent. Salary £600 per annum.

STAFFORDSHIRE GENERAL INFIRMARY, Stafford.—House-Surgeon (male). Salary at the rate of £200 per annum.

SUDAN MEDICAL SERVICE.—Four Medical Officers. Pay commences £E.720 a year, rising to £E.1,200 after thirteen years' service.

TYNEMOUTH: VICTORIA JUBILEE INFIRMARY.—Two House-Surgeons. Salary £75 per annum.

WOLVERHAMPTON AND STAFFORDSHIRE HOSPITAL.—House-Surgeon (unmarried). Salary at the rate of £150 per annum.

CERTIFYING FACTORY SURGEONS.—The following vacant appointments are announced: Nailsea (Somerset), Southend (Essex), Yarmouth (Isle of Wight). Applications to the Chief Inspector of Factories, Home Office, S.W.1.

MEDICAL REFEREE UNDER WORKMEN'S COMPENSATION ACTS (NORTHERN IRELAND) FOR THE COUNTY OF ARMAGH.—Applications to Secretary, Ministry of Labour, 7, Upper Queen Street, Belfast, by February 6th.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column advertisements must be received not later than the first post on Tuesday morning.

APPOINTMENTS.

CRITCHLEY, Miss Elizabeth, M.B., Ch.B.Edin., Assistant Medical Officer, County Borough of Preston.

FALCONER, Kinloch, M.D.Glas., D.P.H.Oxf., Medical Officer of Health, Durham Rural District.

GEBBIE, Nicolas, M.D.Glas., D.P.H.Manch., Medical Officer of Health to the County Borough of Stockport.

INGRAM, John T., M.B., B.S.Lond., Pathologist to St. John's Hospital for Diseases of the Skin, Leicester Square.

CERTIFYING FACTORY SURGEONS.—A. Archibald, M.B., Ch.B.Edin., for the Renfrew District, co. Renfrew; G. A. Jolly, M.B., F.R.C.S.Edin., for the Kirkwall District, co. Orkney; J. A. Preston, L.R.C.P. and S.Ed., L.R.F.P.S.Glas., for the Oxted District, co. Surrey.

DIARY OF SOCIETIES AND LECTURES.

ROYAL SOCIETY OF MEDICINE.

General Meeting of Fellows.—Tues., 5.30 p.m., Ballot for Fellowship.

Section of Pathology.—Tues., 8.30 p.m., Dr. Sidney Dickenson: A Simple Method of Isolating and Handling Individual Spores and Bacteria.

Section of History of Medicine.—Wed., 5 p.m., Dr. Alfred G. Francis: On a Romano-British Surgical Instrument, probably a castration clamp used in the rites of Cybele.

Section of Dermatology.—Thurs., 4 p.m., Cases. 5 p.m., Paper, Professor Levaditi: New Discoveries in the Chemotherapy of Syphilis.

Section of Study of Disease in Children.—Fri., 4.30 p.m., Cases. 5 p.m., Communication:—Dr. D. J. Hishon: Gangrene of Legs following Measles.

Section of Epidemiology and State Medicine.—Fri., 8 p.m., Professor E. W. Hope (Liverpool): The Influence of the Universities on the Advancement of the Public Health.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—Hunterian Lectures by Sir Arthur Keith on Fossil Remains of Ape and Man, 5 p.m. Mon., The Galilee Skull; Wed., Interpretation of Endocranial Casts from Skulls; Fri., Ancient Dwellers in the Thames Valley.

ROYAL SOCIETY OF TROPICAL MEDICINE AND HYGIENE, 11, Chandos Street, W.1.—Thurs., 7.45 p.m., Demonstration; 8.15 p.m., Dr. James Hasson (London): New Procedure in the Diagnosis and Treatment of Leprosy. Address by Lieut.-Colonel W. P. Macarthur, D.S.O., R.A.M.C.: Old-time Plague in Britain.

CENTRAL LONDON THROAT, NOSE, AND EAR HOSPITAL, Gray's Inn Road, W.C.—Fri., 4 p.m., Lateral Sinus Thrombosis.

CHELSEA CLINICAL SOCIETY, The Florence Restaurant, 56, Rupert Street, W.—Tues., 7.30 p.m., Dinner. 8.30 p.m., Discussion on Heliotherapy. Speakers: Dr. Leonard Hill, F.R.S., Sir Henry Gauvain, Dr. Henry MacCormac, and Dr Howard Humphris.

MEDICO-LEGAL SOCIETY, 11, Chandos Street, W.1.—Tues., 8.30 p.m., Discussion: The Excretion of Alcohol in Urine as a Guide to Alcoholic Intoxication. To be opened by Drs. Godfrey Carter and Herbert Southgate.

PLYMOUTH MEDICAL SOCIETY, Beaumont House, Plymouth.—Fri., 8 p.m., Clinical Evening.

POST-GRADUATE COURSES AND LECTURES.

FELLOWSHIP OF MEDICINE AND POST-GRADUATE MEDICAL ASSOCIATION, 1, Wimpole Street, W.1.—*Bethlem Royal Hospital*, S.E.: Lecture Demonstrations in Psychological Medicine at 11 a.m. Tues. and Sat., The Psychoses. *North-Eastern Fever Hospital*, St. Ann's Road, Tottenham: Wed., 2.30 p.m., Sat., 11 a.m., Demonstration in the Diagnosis and Treatment of the Acute Infectious Diseases. *Prince of Wales's General Hospital*, Tottenham, N.: Intensive courses in medicine, surgery, and the specialties. Sessions daily, 10.30 a.m. to 5 p.m. *London Hospital*: Tues., 2 p.m., Special Clinical Demonstration. *National Hospital for Diseases of the Heart*, Westmoreland Street, W.: Intensive course. *Queen's Hospital for Children*, Hackney Road, E.2: Special course; daily lectures and demonstrations. *West End Hospital for Nervous Diseases*, 73, Welbeck Street, W.1: Special course in the diagnosis and treatment of common diseases of the nervous system. Lecture demonstrations at 5 p.m. throughout the week.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.1.—Wed., 2 p.m., Demonstration: Tests of Renal Efficiency. Thurs., 4 p.m., Lecture: Constipation and its Management.

LONDON SCHOOL OF DERMATOLOGY, St. John's Hospital, Leicester Square, W.C.2.—Tues., 5 p.m., Electro-therapeutics. Thurs., 5 p.m., Pathological Demonstration.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.15.—Daily 10.30 a.m. to 1 p.m., Demonstrations of Clinical Methods. 2 to 4 p.m., Selected Cases and General Hospital Work. 4.30 p.m., Clinical Lectures: Mon., Diabetes and Insulin in General Practice; Tues., Recent Advances in Scarlet Fever and Diphtheria; Wed., Treatment of Dysentery; Thurs., Chronic Abdominal Pain; Fri., Hysterical Fits.

QUEEN CHARLOTTE'S MATERNITY HOSPITAL, Marylebone Road, N.W.1.—Thurs., 5 p.m., Late Manifestation of Puerperal Sepsis.

JAMES MACKENZIE INSTITUTE FOR CLINICAL RESEARCH, St. Andrews.—Tues., 4 p.m., Discussions on Research Work, introduced by Members of the Institute Staff. Fri., 4 p.m., Case Reading, followed by discussion.

GLASGOW POST-GRADUATE MEDICAL ASSOCIATION.—At Western Infirmary: Wed., 4.15 p.m., Medical Cases.

MANCHESTER: ST. MARY'S HOSPITALS (Whitworth Street West Branch).—Fri., 4.30 p.m., Urinary Symptoms in Women.

SHEFFIELD UNIVERSITY POST-GRADUATE CLINICS.—At Royal Hospital: Fri., 3.30 p.m., Clinical Examination of Neurological Cases.

British Medical Association.

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Diary of the Association.

JANUARY.

19 Tues. London: Special Pathological Committee, 2.30 p.m.
Camberwell Division: St. Giles's Hospital, Camberwell. Dr. W. Langdon Brown on the Future of Endocrinology, 9 p.m.
Lewisham Division: St. Laurence Vicarage, Catford. Dr. Harold Pritchard on Chronic Infective Processes, 8.45 p.m.
South Essex Division: Victoria Hospital, Southend-on-Sea. Dr. Floyd on Forty Years of General Practice, 8.30 p.m.
West Cornwall Division: Royal Cornwall Infirmary, Truro. Dr. R. S. Coldrey on Haematuria, 3 p.m.
West Suffolk Division: West Suffolk General Hospital, Bury St. Edmunds, 3 p.m.

20 Wed. London: Hospitals Committee, 2.15 p.m.
Cardiff Division: Clinical Meeting, Cardiff Royal Infirmary.
Nuneaton and Tamworth Division: Nuneaton General Hospital. Mr. B. G. Goodwin on Surgical Diseases of the Urinary System, 3.15 p.m.
Willesden Division: Willesden General Hospital, 9 p.m.

21 Thurs. Leeds Division: Medical School, Leeds. Sir Berkeley Moynihan on Gall Stones, 8.30 p.m.

22 Fri. London: Joint Medico-Political and Public Health Committees on Factory Medical Service, 11.30 a.m.
South Suffolk Division: Annual Meeting, Crown and Anchor Hotel, Ipswich, 3.30 p.m.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcement of Births, Marriages, and Deaths is 9s., which sum should be forwarded with the notice not later than the first post on Tuesday morning, in order to ensure insertion in the current issue.

BIRTHS.

HEBBLETHWAITE.—On January 6th, 1926, at Sunnyside Nursing Home Middlesbrough, to Dr. and Mrs. F. W. Hebblethwaite (*née* Annette G. T. Anderson, M.B., Ch.B., D.P.H.Cantab.) of 11, The Avenue Middlesbrough, a son.

HOMI.—At Eagle House Nursing Home, Woodford, on Sunday, January 3rd, 1926, at 7.30 p.m., to the wife of Dr. C. Homi, "Ravenscroft," 54, The Drive, E.17, a daughter.

KEARNEY.—To Dr. and Mrs. Kearney of "Eppingdale," Leytonstone Road, Stratford, a son, on January 4th.

TELLING.—On January 10th, at 1, Victoria Place, St. Giles Street, Northampton, to Dr. and Mrs. Telling (formerly of Ramsgate), a daughter.

MARRIAGES.

CAMERON—BROSNAN.—On December 30th, 1925, at St. Patrick's Church, Soho Square, by the Rev. Canon Dunford, J. Rohan Cameron, M.D., of 2, Hillingdon Mansions, S.E., to Isobel, eldest daughter of the late P. Brosnan and Mrs. Brosnan of 27, South Frederick Street, Dublin.

ROZARIO—DOYLE.—On January 4th, at St. Helen's Church, Brixton, Christopher Joseph Rozario, M.R.C.S.Eng., L.R.C.P.Lond., L.M.Dub., to Helen, second daughter of Mr. and Mrs. James Doyle of Brixton, London.

DEATHS.

HAMPSON.—On January 1st, at his residence, 12, Royal Crescent, Holland Park, W.11, William Hampson, M.A.Oxon., L.M.S.A.Lond., late of Röntgen Society, dearly beloved husband of Amy Bolton Hampson, both late of Rock Ferry.

MASSIE.—On December 31st, 1925, at the Bushey Hospital, Robert Massie, O.B.E., F.R.C.S.E., of "Normanhurst," Royston Park Avenue, Hatch End, Middlesex, beloved husband of Annie Massie, aged 38 years.

WHITE.—At St. George's Hospital, Bombay, on December 4th, 1925, Maurice Forbes White, O.B.E., Croix de Guerre "avec palmes," M.B., Lieutenant-Colonel Indian Medical Service, Residency Surgeon, Rajkot, Kathiawar, aged 48 years, the beloved husband of Winifred White, and dear father of Pat and Jack; son of the late John Forbes White, LL.D., of Aberdeen and Craig Tay, Dundee.

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